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**APPLICANTS**

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\*\* CONTINUING DATA \*\*\*\*\* *Name JO*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *OK JO*  
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
 09/15/2003

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> <i>85</i>	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>JO</i> Examiner's Signature	<i>JO</i> Initials			

**ADDRESS**

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**TITLE**

Analytical shell-model producing apparatus

<b>FILING FEE RECEIVED</b> 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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